



UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of:

Wilhelm HOERRMANN

Serial No.: 09/926,444

Filed: January 29, 2002

For: LABORATORY EXAMINATION OF A
BODY FLUID OR TISSUE SAMPLE

Art Unit: 1641

Examiner: Deborah A. Davis

Atty. Docket: P67254US0

RESPONSE UNDER 37 C.F.R. § 1.111

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

This is in response to the Office Action mailed March
22, 2004, please enter the following amendment in the
above-identified application as follows:

Amendment to the claims can be found on page 2; and
Remarks/Arguments can be found on page 8.

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THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re the Appln. of: Wilhelm HOERRMANN

Serial No.: 09/926,444

Examiner: Deborah A. Davis

Filed: January 29, 2002

Group Art Unit: 1641

Title: LABORATORY EXAMINATION OF A BODY FLUID OR TISSUE SAMPLE

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

Transmitted herewith is an AMENDMENT UNDER 37 CFR §1.111 in the captioned patent application.

- ☒ Small Entity status of this application under 37 C.F.R. 1.27 has been established by a verified statement previously submitted.
☐ A verified Statement to establish small entity status under 37 C.F.R. 1.27 is enclosed.
☐ No additional fee is required.

The fee has been calculated as shown below:

Claims Remaining After <u>Amendment</u>			Present Extra		Small Entity		Total Fees Due
Total	30	- 20 =	10	x \$ 9	=		\$90.00
Indep.	2	- 3 =	0	x \$ 43	=		\$

☐ First Presentation of Multiple Dependent Claims +140 = \$ \$
Total Additional Fee

☒ Please charge Deposit Account No. 06-1358 in the amount of \$_____. A duplicate of this sheet is attached.

☒ A credit card payment in the amount of \$ 90.00 is attached for: Additional Claims Fee

The Commissioner is also authorized to charge payment of any other additional fees associated with this communication or credit any overpayment to Deposit Account No. 06-1358.

I.D.: P67254US0
Date: June 22, 2004
400 Seventh Street, N.W.
Washington, D.C. 20004-2201

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By:

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